POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	[illegible]	45	2/4
FORMALITY REVIEW	AM	896	02/28/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	Rejected	N	Non-elected
=	Allowed	I	Interference
—	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim Final	Claim Original	Date 8/30/02	Date 2/24/03	Date 4/9/07
	1	✓		
	2	✓		
	3	✓		
	4	✓		
	5	✓		
	6	✓		
	7	✓		
	8	✓		
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	12	✓		
	13	✓		
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	26		✓	✓
	27		✓	✓
	28		✓	✓
	29		✓	✓
	30		✓	✓
	31		✓	—
	32		✓	✓
	33		✓	✓
	34		✓	✓
	35		✓	✓
	36		✓	✓
	37		✓	✓
	38		✓	—
	39		✓	✓
	40		✓	✓
	41		✓	✓
	42		✓	✓
	43		✓	✓
	44		✓	✓
	45		✓	✓
	46		✓	✓
	47		✓	✓
	48		✓	✓
	49		✓	✓
	50		✓	✓

Claim Final	Claim Original	Date 2/24/03	Date 4/4/07
	51	✓	✓
	52	✓	✓
	53	✓	✓
	54	✓	✓
	55	✓	✓
	56	✓	✓
	57	✓	✓
	58	✓	✓
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Claim Final	Claim Original	Date
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If more than 150 claims or 10 actions staple additional sheet here

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